

107TH CONGRESS
2D SESSION

S. 2045

To amend the Foreign Assistance Act of 1961 to take steps to control
the growing international problem of tuberculosis.

IN THE SENATE OF THE UNITED STATES

MARCH 21, 2002

Mrs. BOXER (for herself and Mr. SMITH of Oregon) introduced the following
bill; which was read twice and referred to the Committee on Foreign Relations

A BILL

To amend the Foreign Assistance Act of 1961 to take steps
to control the growing international problem of tuberculosis.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “International Tuber-
5 culosis Control Act of 2002”.

6 **SEC. 2. FINDINGS.**

7 Congress finds that:

8 (1) Tuberculosis is a great health and economic
9 burden to impoverished nations and a health and se-

1 security threat to the United States and other indus-
2 trialized countries.

3 (2) Tuberculosis kills 2,000,000 people each
4 year (a person every 15 seconds) and is second only
5 to HIV/AIDS as the greatest infectious killer of
6 adults worldwide.

7 (3) Tuberculosis is today the leading killer of
8 women of reproductive age and of people who are
9 HIV-positive.

10 (4) One-third of the world's population is cur-
11 rently infected with the tuberculosis bacterium, in-
12 cluding 10,000,000 through 15,000,000 persons in
13 the United States, and someone in the world is
14 newly infected with tuberculosis every second.

15 (5) With 46 percent of tuberculosis cases in the
16 United States in the year 2000 found in foreign-
17 born persons, as compared to 24 percent in 1990, it
18 is clear that the only way to control tuberculosis in
19 the United States is to control it worldwide.

20 (6) Left untreated, a person with active tuber-
21 culosis can infect an average of 10 through 15 peo-
22 ple in one year.

23 (7) Pakistan and Afghanistan are among the
24 22 countries identified by the World Health Organi-

1 zation as having the highest tuberculosis burden
 2 globally.

3 (8) More than one-quarter of all adult deaths in
 4 Pakistan are due to tuberculosis, and Afghan refu-
 5 gees entering Pakistan have very high rates of tu-
 6 berculosis, with refugee camps, in particular, being
 7 areas where tuberculosis runs rampant.

8 (9) The tuberculosis and AIDS epidemics are
 9 inextricably linked. Tuberculosis is the first mani-
 10 festation of AIDS in more than 50 percent of cases
 11 in developing countries and is responsible for 40 per-
 12 cent or more of deaths of people with AIDS world-
 13 wide.

14 (10) An effective, low-cost cure exists for tuber-
 15 culosis: Directly Observed Treatment Short-course
 16 or DOTS. Expansion of DOTS is an urgent global
 17 priority.

18 (11) DOTS is one of the most cost-effective
 19 health interventions available today. A full course of
 20 DOTS drugs costs as little as US\$10 in low-income
 21 countries.

22 (12) Proper DOTS treatment is imperative to
 23 prevent the development of dangerous multidrug re-
 24 sistant tuberculosis (MDR-TB) that arises through
 25 improper or incomplete tuberculosis treatment.

1 (13) The Global Fund to fight AIDS, Tuber-
 2 culosis, and Malaria is an important new global
 3 partnership established to combat these 3 infectious
 4 diseases that together kill 6,000,000 people a year.
 5 Expansion of effective tuberculosis treatment pro-
 6 grams should constitute a major component of Glob-
 7 al Fund investment.

8 **SEC. 3. DEFINITIONS.**

9 In this Act:

10 (1) DOTS.—The term “DOTS” or “Directly
 11 Observed Treatment Short-course” means the World
 12 Health Organization-recommended strategy for
 13 treating standard tuberculosis.

14 (2) GLOBAL ALLIANCE FOR TUBERCULOSIS
 15 DRUG DEVELOPMENT.—The term “Global Alliance
 16 for Tuberculosis Drug Development” means the
 17 public-private partnership that brings together lead-
 18 ers in health, science, philanthropy, and private in-
 19 dustry to devise new approaches to tuberculosis and
 20 to ensure that new medications are available and af-
 21 fordable in high tuberculosis burden countries and
 22 other affected countries.

23 (3) GLOBAL PLAN TO STOP TUBERCULOSIS.—
 24 The term “Global Plan to Stop Tuberculosis” means
 25 the plan developed jointly by the Stop Tuberculosis

1 Partnership Secretariat and Partners in Health that
 2 lays out what needs to be done to control and elimi-
 3 nate tuberculosis.

4 (4) GLOBAL TUBERCULOSIS DRUG FACILITY.—
 5 The term “Global Tuberculosis Drug Facility
 6 (GDF)” means the new initiative of the Stop Tuber-
 7 culosis Partnership to increase access to high-quality
 8 tuberculosis drugs to facilitate DOTS expansion.

9 (5) STOP TUBERCULOSIS PARTNERSHIP.—The
 10 term “Stop Tuberculosis Partnership” means the
 11 partnership of the World Health Organization, do-
 12 nors including the United States, high tuberculosis
 13 burden countries, multilateral agencies, and non-
 14 governmental and technical agencies committed to
 15 short- and long-term measures required to control
 16 and eventually eliminate tuberculosis as a public
 17 health problem in the world.

18 **SEC. 4. ASSISTANCE FOR TUBERCULOSIS PREVENTION,**
 19 **TREATMENT, CONTROL, AND ELIMINATION.**

20 Section 104(c) of the Foreign Assistance Act of 1961
 21 (22 U.S.C. 2151b(c)) is amended by adding at the end
 22 the following:

23 “(7)(A) Congress recognizes the growing inter-
 24 national problem of tuberculosis and the impact its
 25 continued existence has on those countries that had

1 previously largely controlled the disease. Congress
2 further recognizes that the means exist to control
3 and treat tuberculosis by implementing the Global
4 Plan to Stop Tuberculosis and by adequately invest-
5 ing in newly created mechanisms, including the
6 Global Tuberculosis Drug Facility, and that it is
7 therefore a major objective of the foreign assistance
8 program to control the disease. To this end, Con-
9 gress expects the agency primarily responsible for
10 administering this part—

11 “(i) to coordinate with the World Health
12 Organization, the Centers for Disease Control,
13 the National Institutes of Health, and other or-
14 ganizations with respect to the development and
15 implementation of a comprehensive tuberculosis
16 control program; and

17 “(ii) to set as a goal the detection of at
18 least 70 percent of the cases of infectious tuber-
19 culosis, and the cure of at least 85 percent of
20 the cases detected, by December 31, 2005, in
21 those countries classified by the World Health
22 Organization as among the highest tuberculosis
23 burden, and by December 31, 2010, in all coun-
24 tries in which the agency has established devel-
25 opment programs.

1 “(B)(i) There is authorized to be appropriated
2 \$200,000,000 for each of the fiscal years 2003
3 through 2005 for carrying out this paragraph.

4 “(ii) Funds appropriated under this paragraph
5 are authorized to remain available until expended.

6 “(C) In carrying out subparagraph (A), not less
7 than 75 percent of the amount authorized to be ap-
8 propriated under subparagraph (B) shall be ex-
9 pended for antituberculosis drugs, supplies, patient
10 services, and training in diagnosis and care, in order
11 to increase directly observed treatment shortcourse
12 (DOTS) coverage, including funding for the Global
13 Tuberculosis Drug Facility.

14 “(D) In carrying out subparagraph (A), of the
15 amount authorized to be appropriated under sub-
16 paragraph (B)—

17 “(i) not less than 10 percent shall be used
18 for funding of the Global Tuberculosis Drug
19 Facility;

20 “(ii) not less than 7.5 percent shall be
21 used for funding of the Stop Tuberculosis Part-
22 nership; and

23 “(iii) not less than 2.5 percent shall be
24 used for funding of the Global Alliance for Tu-
25 berculosis Drug Development.

1 “(E) The President shall submit a report to
2 Congress annually specifying the increases in the
3 number of people treated and the increases in num-
4 ber of tuberculosis patients cured through each pro-
5 gram, project, or activity receiving United States
6 foreign assistance for tuberculosis control pur-
7 poses.”.

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